#### **Supplemental Application Data Sheet**

## **Application Information**

Application number:: 10/809,089 03/25/04 Filing Date:: Application Type:: Regular Subject Matter:: Utility Suggested classification:: Suggested Group Art Unit:: 1612 CD-ROM or CD-R?:: None Number of CD disks:: Number of copies of CDs:: Sequence submission?:: None Computer Readable Form (CRF)?:: No Number of copies of CRF:: Title:: NOVEL ANTI-ARRHYTHMIC AND HEART FAILURE DRUGS THAT TARGET THE LEAK IN THE RYANODINE RECEPTOR (RyR2) AND **USES THEREOF** Attorney Docket Number:: 0019240.00596US1 Request for Early Publication?:: No Request for Non-Publication?:: No Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?:: Yes Petition included?:: No Petition Type:: Licensed US Govt. Agency:: Contract or Grant Numbers:: Secrecy Order in Parent Appl.?:: No

#### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Andrew Middle Name:: Robert

Family Name:: MARKS

Name Suffix::

City of Residence:: Larchmont

State or Province of Residence:: NY

Country of Residence:: US

Street of mailing address:: 12 Locust Avenue

City of mailing address:: Larchmont

State or Province of mailing address:: NY

Country of mailing address::

Postal or Zip Code of mailing address:: 10538

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Donald

Middle Name:: W.

Family Name:: LANDRY

Name Suffix::

City of Residence:: New York

State or Province of Residence:: NY

Country of Residence:: US

Street of mailing address:: 29 Claremont Avenue

City of mailing address:: New York

State or Province of mailing address:: NY

Country of mailing address::

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Shixian

Middle Name::

Family Name:: DENG

Name Suffix::

City of Residence:: White Plains

State or Province of Residence:: NY

Country of Residence:: US

Street of mailing address:: 34 Ogden Avenue

City of mailing address:: White Plains

State or Province of mailing address:: NY

Country of mailing address::

Postal or Zip Code of mailing address:: 10605

Applicant Authority Type:: Inventor

Primary Citizenship Country:: People's Republic of China

Status:: Full Capacity

Given Name:: Zhen

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Middle Name:: Zhuang

Family Name:: CHENG

Name Suffix::

City of Residence:: Elmhurst

State or Province of Residence:: NY

Country of Residence:: US

Street of mailing address:: 60-51 Woodhaven Boulevard, 1st Floor

City of mailing address:: Elmhurst

State or Province of mailing address:: NY

Country of mailing address::

Postal or Zip Code of mailing address:: 11373

**Correspondence Information** 

Correspondence Customer Number:: 56949

**Representative Information** 

Representative Customer Number:: 56949

# **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/763498	01/22/04
10/763498	Continuation-in-part of	<del>10/680988</del>	<del>10/07/03</del>
10/680988	Continuation-in-part of	<del>10/608723</del>	06/26/03
10/608723	Continuation-in-part of	<del>10/288606</del>	<del>11/05/02</del>
10/288606	Continuation of	09/568474	05/10/00

### **Foreign Priority Information**

# **Assignee Information**

Assignee name:: THE TRUSTEES OF COLUMBIA UNIVERSITY

IN THE CITY OF NEW YORK

Street of mailing address:: 412 Low Memorial Library

535 West 116th Street

City of mailing address:: New York

State or Province of mailing address:: NY

Country of mailing address::

Postal or Zip Code of mailing address:: 10027